Sometimes the approaches are complementary—hypotheses need to be tested and this can be arduous work, particularly in assessing predictions about a disease process. Some of the work described in this book, for example, on the mechanism and range of the anti-psychotic effect is in this category. But to expect the cause of schizophrenia to drop out of a follow up, however detailed, of 10 years of admissions to a district general hospital is I think a mistake. At this point the hard headed empiricist and the woolly speculator part company. But the book has much of interest to say about what else went on in psychiatry at Northwick Park in these years.

T J CROW

Current Management of Cerebral Aneurysms. Book 15 in Neurosurgical Topics. Published by the American Association of Neurological Surgeons. (Pp 327; \$90). ISBN 0-9624246-6-8.

This is a recent addition to the series of neurosurgical topics generated by the American Association of Neurological Surgeons. It is a multi-author book which covers all aspects of intracranial aneurysms. The book is set out in a standard fashion addressing the epidemiology, clinical presentation and subsequent diagnosis of intracranial aneurysms before embarking on the perioperative and anaesthetic management and subsequent surgical approaches to the various different aneurysms. The last few chapters discuss the modern expectations of surgery, the role of endovascular treatment and discuss the management of familial and other unusual aneurysms.

On the whole, the chapters are well written and illustrated. All are extensively referenced, mainly from the American literature. Although compiled by a neurosurgical association, the individual chapters are written by a variety of specialists which serves to generate the important theme that management of subarachnoid haemorrhage is now considered a condition that demands a multidisciplinary approach. I suspect therefore that this book will be of great interest to a variety of specialists including neurosurgeons, neuroanaesthetists, neurointensive care specialists, neurophysiologists and neurologists. This is particularly so as a large section of this book is devoted to the aspects of perioperative resuscitation and the management of complications.

In summary, I would strongly recommend this book to the aforementioned specialists who are dealing with patients suffering from subarachnoid haemorrhage. A lot of the information provided is applicable to a variety of neurovascular disorders and hence may be of interest to a wider readership. Even with the advent of endovascular methods, the principles laid down in the book will almost certainly remain valid for many years to come.

P J KIRKPATRICK

Cavernous Malformations. By ISSAM A AWAD and DANIEL L BARROW. Publishers: American Association of Neurological Surgeons, USA 1993. (Pp 224; \$90). ISBN 1-879284-07-3.

Since the advent of MRI, cavernous malformations have been diagnosed much more

frequently than in the past. These hamartomatous lesions consist of cavernous spaces lined by endothelium and collagen. Cavernous malformations may be discovered incidentally or they may be associated with a variety of neurological symptoms. Local haemorrhage into surrounding brain parenchyma is invariably present but catastrophic haemorrhage exceedingly rare.

The editors of this book have set out to compile a complete manual for neurosurgeons by gathering together the large amount of information about cavernous malformations which has come to light over the last decade. Chapters have been contributed by pathologists, radiologists and neurosurgeons and although there is some overlap this allows different viewpoints to be presented.

The text is easily read and well referenced. Illustrations are plentiful. The photographs of gross specimens, the photomicrographs and the diagrams are all very clear. Some of the figures showing MRI and CT appearances are a little disappointing and could have been more carefully selected. Chapters on pathology, epidemiology and clinical features contain a wealth of factual and statistical data. The radiological assessment of these lesions is covered in terms readily understood by those of us in whom the very mention of the paramagnetic causes a peculiar kind of mental shutdown.

The book could have covered 90% of what is important in less than half of the present length and would in shortened form reach its busy and factually overloaded target audience much more effectively. A good buy for the departmental library.

DAVID HARDY

An Introduction to Neuropathology—Second Edition. Edited by J HUME ADAMS and D I GRAHAM. Publishers: Churchill Livingstone, London 1994. (Pp 417; £35.00). ISBN 443044953.

Through pioneers such as Charcot, Alzheimer, Bailey and Cushing, neurology, neurosurgery and psychiatry bear a heavy collective responsibility for the development of neuropathology. It is perhaps ironic that an understanding of pathological mechanisms and the structural changes that occur in the brain and spinal cord has become even more important to the practice of clinical neuroscience through the development of imaging techniques and molecular biology. Interpretation of MRI and CT requires a basic knowledge of anatomy and of functional neuropathology and the relationship of molecular genetic defects to clinical neurology and to potential therapeutic advances in tumour therapy and psychiatric disorders requires an understanding of cell pathology. The recognition that pathology plays an important part in the practice of clinical neuroscience is reflected in the increasing requirement for pathology in educational programmes for trainees and trained alike. The question in everyone's mind is how to find the time and material for keeping up to date with neuropathology.

Although called an Introduction to Neuropathology, the book by Adams and Graham is also a useful update on basic neuropathology. Gone are the old mystical terms, which often made neuropathology opaque to the outside world, and in their place is a concise, well-written, clearly illus-

trated book which one can, if desperate, easily read straight through from cover to cover. It is not weighed down by references but concentrates on the bare facts with more detailed and extensive accounts listed as further reading in individual chapters. Particularly good sections are those on oedema, vascular disease and trauma and there are useful updates on the prion diseases and the devastating effect of AIDS. The section on techniques of examining the brain both macroscopically and microscopically will be of value to practising pathologists and give clinicians an insight into what it is possible to derive from pathological examination of the nervous system.

This book is to be highly recommended as a cost effective answer to continuing medical education for clinician and pathologist alike.

ROY WELLER

Current Diagnosis in Neurology. Edited by E FELDMANN. Publisher: Mosby, St Louis, Missouri 1994. (Pp 399). ISBN 0-8016-6963-4.

The preface to this book states that it is "designed to provide neurologic practitioners with a state of the art approach to the diagnosis of neurologic diseases". The first thing to say is that it is not concerned with treatment, which is dealt with in another volume, and so in the absence of its sister volume, this book deals with only part of overall patient management and limits its usefulness.

With over 100 authors often giving a very personal view on how to diagnose a wide variety of neurological conditions, it is perhaps not surprising to find a wide variation in chapter quality. My major criticism of the book is that too many of the authors have relied on personal experience rather than literature review and scientific method in compiling their contributions. This was obviously a deliberate editorial policy as the volume is poorly referenced and each chapter merely provides a few references for suggested reading. In these days of economic justification and health reforms we cannot simply request expensive investigations, such as gadolinium enhanced MRI, on the basis of anecdote and expect neuroradiologists to exceed their budgets in providing such investigations. Neurologists not only need to be aware of what a test could identify, but also the diagnostic yield in the elucidation of a diagnosis using that particular investigation. Most of the information contained within this book would already be present within the temporal lobe memory banks of card carrying neurologists and it should appeal more to neurologists in training or general physicians and other specialties.

Having said all this, there are several excellent attributes to the book. In particular, there are very good chapters on some of the muscle and vascular diseases and the use of tables throughout the book makes for easy reference. It was also enjoyable to read about how certain people approach the diagnostic process. Overall, however, this was an opportunity to produce a definitive text on the criteria for diagnosing neurological diseases which has unfortunately been missed.

JOHN ZAJICEK